PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10666799

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			21				٢	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	7 50 .00
TOTAL CHARGEABLE CLAIMS			21 minus 20=		* (.			X\$ 9=		OR	X\$18=	18,00
INDEPENDENT CLAIMS			ے minus 3 =		*			X43=		OR	X84=	84,00
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	olumn 2	L	TOTAL		OR	TOTAL	852.00
CLAIMS AS AMENDED - PART II								OTHER THAN				THAN
. (Column 1)			, (Colun			(Column 3)	-	SMALL		OR !	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER . DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
TOTAL ADDIT, FEE										OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui	mn 21	(Column 3)		0011.1 221		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus .	***]=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA]	+145=		OR	+290=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	•
		(Column 1)		(Colu	mn 2)	(Column 3)	,	(0011. 1 C.C.)		_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**.		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	l, e il
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
	ii ine Highest Nur The "Highest Nur	mber Previously Pa iber Previously Pa	id For" (Total o	r Independ	ent) is the	e highest number	er four	nd in the app	ropriate bo	x in co	olumn 1	